

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Danuta CIOK et al.

Group Art Unit: 3761

Serial No.: 10/541,823

Examiner: Hand, Melanie Jo

Filed: July 11, 2005

Confirmation No.: 6121

For: OSTOMY APPLIANCE

TRANSMITTAL

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a **Response to Restriction Requirement** for the above-captioned patent application.

The fee has been calculated as shown below:

	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra		Small Entity Rate Additional Fee	(or)	Other Than Small Entity Rate Additional Fee
Total Claims	22	- 22	=	0	x 26 = \$	x 52 =	\$
Ind. Claims	4	- 4	=	0	x 110 = \$	x 220 =	\$
<input type="checkbox"/> Multiple Dependent Claims					+ 195 = \$	+ 390 =	\$
				Total	\$	Total	\$

\_\_\_\_\_ A credit card payment form in the amount of \_\_\_\_\_ is attached for:

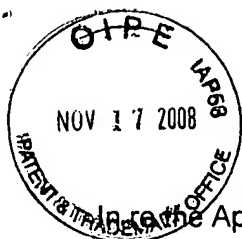
XX If a Petition for Extension of Time is necessary and the Petition and/or the credit card payment form is not enclosed, this will act as the Petition and applicant herewith petitions the Commissioner to extend the time for response and charge any fees necessary under 37 CFR 1.17 (a)(1)-(5) to Deposit Account No. 06-1358. The Commissioner is also authorized to charge payment of any other additional fees associated with this communication or credit any overpayment to Deposit Account No. 06-1358. A duplicate copy of this sheet is attached.

Respectfully submitted,

JACOBSON HOLMAN PLLC

By: *Harvey B. Jacobson, Jr.* R No 40,495  
Harvey B. Jacobson, Jr.  
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400 Seventh Street, N.W.  
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Telephone: (202) 638-6666  
Date: November 17, 2008  
HBJ/SCB



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f5

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PATENT  
ATTY. DOCKET NO.: P70681US0

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***RESPONSE TO RESTRICTION REQUIREMENT***

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P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Restriction Requirement mailed October 16, 2008 (Paper No. 20081012), Applicants respond as set forth herein.